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CONFIRMATION NO. 2886

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/623,238	<b>FILING OR 371(c) DATE</b> 07/17/2003 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> 3068	
<b>APPLICANTS</b> Edward Lynch, Northern Ireland, UNITED KINGDOM; Jurgun Schemmer, King Cty, CANADA;					
<b>** CONTINUING DATA *****</b> This application is a DIV of 10/097,679 03/13/2002 PAT 6,669,931 which claims benefit of 60/279,969 03/29/2001					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 10/20/2003</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 23	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 26822					
<b>TITLE</b> METHOD OF TREATING DENTAL CARIES AND REMINERALIZING LESIONS					
<b>FILING FEE RECEIVED</b> 888	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

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